PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Applica O	Application of Oocket Number 09/933, 992		
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL	ENTITY	OR -		R THAN ENTITY	
FOR	NUMBER FILE	אטא ס	BER EXTRA	7	RATE	PEE	1	RATE	FEE	
BASIC FEE (37 CFR 1.16(a))		·		1	70112	1	OR		3	
TOTAL CLAIMS (37 CFR 1.16(c))] :	X.5. =		OR	x s=	0	
INDEPENDENT CLAIMS (37 CFR 1.16(b)) mlaus 3 =		3			x s=		OR	x s=	0	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))					+s=		OR	+5=		
* if the difference in column 1 is tess than zero, enter "O" in column 2.					TOTAL		OR	TÖTAL		
CLAIMS AS AMENDED - PART II							07 1455			
11 9/05 (Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL		
I≪I IRE	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total "	3 Minus	1117]		X \$=		OR.	X \$. =	0	
Total (pr CFR 1.18(s) Independent (pr CFR 1.18(b))	2 Minus	- 8	° — .		X \$=		OR	X \$=	6.	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (2) CFR 1.18(d))					+ \$=		OR	+\$=		
Luclas					TOTAL ADD'L FEE	•	OR	TOTAL ADD'L FEE		
3 / 4 / 0 6 (Column 1) (Column 2) (Column 3)										
a REI	LAIMS MAINING UFTER INDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total Or or ra 1.16(a)	2 Minus	1117	0	Γ	x s=		OR	x \$	0	
Total Or CFR 1.14(2) Independent or CFR 1.14(2) W	Minus	-8	- 0		x 8		OR	X \$=	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 5=		OR	+:		
i					TOTAL ADD'L FEE		OR	ADD'L FEE		
(Col	uma 1)	(Column 2)	(Column 3)	_		<u> </u>				
O REA	LAIMS MAINING FTER NOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL . FEE		RATE	ADDI- TIONAL FEE	
Total professory and care independent (ar of a 1.1469)	Minus		-		K \$=		OR	X \$=		
Independent *-	Minus	***	•		. s=		OR	x \$=]	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s _ =		OR	+ 5 =	,	
					OTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.										

This objection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the CHef Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.